MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICATION: 10/536535   5/26/05

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51						
2								52						
3		1,2						53						
4		0,1						54						
5		1,0						55						
6		0,1						56						
7		1,0						57						
8		0,1						58						
9		1,0						59						
10		0,1						60						
11		1,0						61						
12		0,1						62						
13		1,0						63						
14								64						
15								65						
16								66						
17								67						
18								68						
19								69						
20								70						
21								71						
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37								87						
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39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	1	↓		↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	12	←		←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	13							TOTAL CLAIMS						